Glasgow City Council Internal Audit Section
Committee Summary
Chief Executives | Glasgow Communities Fund - Monitoring Arrangements

1 Introduction

1.1 As part of the agreed Internal Audit plan, we have carried out a review of the monitoring arrangements within the Glasgow Communities Fund.

1.2 The Glasgow Communities Fund (GCF) is a grant fund informed by the Council's Strategic Plan which replaced the previous Integrated Grants Fund. The fund provides grant funding to organisations to deliver services to the citizens of Glasgow and is administered by the Grants and Monitoring Team within Chief Executives.

1.3 Applications are submitted for three year funding periods and in the period 2023-2026 a total of 220 organisations were successful in their grant applications. Of the 220 organisations, 17 receive funding from two funding streams, therefore there are a total of 237 awards to 220 organisations.

1.4 The purpose of the audit was to gain assurance that the monitoring framework for the Glasgow Communities Fund has been implemented, is effective, and is being followed.

1.5 The scope of the audit included a review of the key controls in the following areas:

- Roles and responsibilities.

- Documented framework, procedures and guidelines for monitoring.
- Training and communication arrangements.
- Documentation held, both that supplied by the grant recipients and that prepared by monitoring officers.
- Monitoring and progress visits.

2 Audit Opinion

2.1 Based on the audit work carried out a reasonable level of assurance can be placed upon the control environment. The audit has identified some scope for improvement in the existing arrangements and one recommendation which management should address.

3 Main Findings

3.1 We are pleased to report that the key controls are in place and generally operating effectively. There are sufficient and appropriate documented procedures in place covering the key monitoring tasks. New officers receive a structured training programme that is complemented by an effective framework of procedures.

3.2 It is noted that management maintain strong lines of communication within the team, including weekly team meetings, and regular one to one support. This ensures that all staff are aware of their roles and responsibilities and any training opportunities can be identified and implemented.

3.3 From a sample of 25 organisations which had been awarded funding, we found that documentation for each stage of the monitoring process is clear and support is offered to grant recipients to enable them to complete returns accurately. Documentation is easily accessed and retained appropriately within a secure central folder in EDRMS that is accessible to the monitoring team.

3.4 For the financial year 2024/25 a monitoring visit had been conducted for 216 of the 220 organisations, and we found that, for the sample of 25 organisations tested, the visits covered all appropriate areas. Valid reasons were provided for why monitoring visits had not been completed for the remaining four organisations. These included one which had closed, one which had been referred to another agency causing the visit to become delayed, and two organisations which had issues in arranging a suitable time and were noted for visits early in the following year.

3.5 However, we noted some areas for improvement within the documented procedures. While the stakeholder consultation regarding the monitoring framework was presented at committee, and the proposed framework agreed, it has not been formally documented. Staff are however aware of it. Also, a written process has been documented for initial monitoring visits, but this requires to be updated to ensure that steps are included for subsequent visits, ensuring a consistent and structured approach throughout the funding term.

3.6 An action plan is provided at section four outlining our observations, risks and recommendations. We have made one recommendation for improvement. The priority of each recommendation is:

Priority	Definition	Total
High	Key controls absent, not being operated as designed or could be improved. Urgent attention required.	0
Medium	Less critically important controls absent, not being operated as designed or could be improved.	0
Low	Lower level controls absent, not being operated as designed or could be improved.	1
Service Improvement	Opportunities for business improvement and/or efficiencies have been identified.	0

3.7 The audit has been undertaken in accordance with the Global Internal Audit standards in the UK public sector.

3.8 We would like to thank officers involved in this audit for their cooperation and assistance.

3.9 It is recommended that the Head of Audit and Inspection submits a further report to Committee on the implementation of the actions contained in the attached Action Plan.

4 Action Plan

No.	Observation and Risk	Recommendation	Priority	Management Response
Key Control: Documented framework, procedures and guidelines are in place.				
1	Documented procedures are in place to guide Monitoring Officers through most stages of the monitoring process. A proposed framework was presented to the Wellbeing, Equalities, Communities, Culture and Engagement City Policy Committee in May 2024, and while staff are aware of this framework, the final approved framework was not formally documented. Also, documented procedures have been developed for initial monitoring visits, but these have not been updated to incorporate processes for subsequent annual monitoring visits. The absence of a formal documented framework and updated procedures increase the risk that there may be gaps in clarity and consistency in monitoring arrangements, particularly for new staff.	GCF management should document the agreed Performance Monitoring Framework and ensure that this is made available to all relevant staff and external stakeholders. Procedures should be reviewed and updated on an annual basis to ensure that they remain accurate and relevant.	Low	**Response:** The Performance Monitoring Framework for GCF2 will be produced in one document and shared with all relevant staff and stakeholders. The procedures will be reviewed annually as part of the process to develop the Performance Monitoring Framework for GCF3. This will be done in conjunction with the Oversight Group established to lead on the implementation of GCF3 and relevant stakeholders using a variety of engagement methods. **Officer Responsible for Implementation:** Group Manager and Economic Development Manager **Timescales for Implementation:** The Performance Monitoring Framework for GCF2 will be

No.	Observation and Risk	Recommendation	Priority	Management Response
				documented and shared with relevant stakeholders by the end of February 2026.
				The Performance Management Framework for GCF3 will be developed between February and May 2026 and reviewed annually thereafter.